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MAY 0 8 2007

HEWLETT-PACKARD COMPANY Intellectual Property Administration P.O. Box 272400 Fort Collins, Colorado 80527-2400

PATENT APPLICATION

200316700-1

Inventor(s):

Iddys D. Figueroa et al.

Confirmation No.: 8624

ATTORNEY DOCKET NO.

Application No.: 10/825,870

Examiner: CHANG, Rosie Yuh Loo

Filing Date:

April 16, 2004

Group Art Unit: 1762

Title: A System and Method for Producing Layered Oral Dosage Forms

Mail Stop Amendment **Commissioner For Patents** PO Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

Other								Fe	<u> </u>	
(1)			D BY C	THER THAN A	SMA		NTITY			
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3) NUMBER EXTRA	HIGH PREVIO	(5) PRESENT EXTRA		(6) RATE		ADDITIONAL FEES		
TOTAL CLAIMS	48 MINUS			= 0		×	\$50	\$	0	
INDEP. CLAIMS	2	MINUS	6		=	0	×	\$200	\$	0
	FIRST PRESENTATI	ON OF A MU	JLTIPLE	DEPENDENT C	LAIM		+	\$360	\$	0
TENSION FEE	1st Month \$120	nth 2nd Month S450		3rdMonth \$1020			4th Month \$1590		\$	0

Charge \$ 0 to Deposit Account 08-2025. At any time during the pendency of this application, please charge any fees required or credit any over payment to Deposit Account 08-2025 pursuant to 37 CFR 1.25. Additionally charge any fees to Deposit Account 08-2025 under 37 CFR 1.16 through 1.21 inclusive, and any other sections in Title 37 of the Code of Federal Regulations that may regulate fees. A duplicate copy of this sheet is enclosed.

I hereby certify that this paper is being transmitted to the Patent and Trademark Office facsimile number (571) 273-8300. Date of facsimile: May 8, 2007

Signature:

Typed Name: Rebecca R. Schow

Attorney/Agent for Applicant(s)

Reg No.: 40,326

Steven L. Nichols

Respectfully submitted,

Iddys D. Figueroa et al.

Ву

Date:

May 8, 2007

Telephone: 801-572-8066

Rev 10/05 (TrensAmdFax)

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18015727666

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Other						Fee\$						
	CLAIMS AS	AMENDE	DBY	OTHER	THAN A	SMA	LL E	YTITY	•			
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3) NUMBER EXTRA	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR			(5) PRESENT EXTRA		(6) RATE		(7) ADDITIONAL FEES		
TOTAL CLAIMS	48 MINUS		79			= 0		×	\$50	1	0	
INDEP. CLAIMS	2	MINUS	6			=	0	X \$200		\$	0	
	FIRST PRESENTATIO	N OF A MU	JLTIPLE	DEPE	NDENT CL	-AIM		+	\$360	\$	0	
XTENSION FEE	1st Month \$120	2nd Month 3rdMonth \$450			4th Month \$1590		\$	0				
						<u> </u>		THE	RFEES	•		

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Typed Name:

Rebecca R. Schow

Rev 10/05 (TransAmdFex)

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Attorney Docket No.: 200316700-1

Certificate of Transmission

I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for Patent via the USPTO central facsimile number, (571) 273-8300.

May 8, 2007

Rebecca R. Schow Typed or printed name of person signing Certificate

Transmitted, herewith, are the following documents:

- 1. Transmittal Letter for Response/Amendment with Duplicate Copy (2 pages)
- 2. Certificate of Transmission (1 page)
- 3. Amendment (18 pages)